

# **EXHIBIT D**

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**From:** John Stocking  
**To:** kleinsing@atechdesigns.com  
**CC:** duque@insightbb.com  
**Sent:** 1/22/2009 1:26:08 PM  
**Subject:** Rearward Needle Storage

Hi Karl,

That sounds like a good plan.

Do you think there are any problems advancing the needle through the catheter (i.e., catheter shearing) if the needle is stored rearward of the valve? We picture rearward storage of the needle (i.e., within the needle attachment body) being used to avoid the sealing means memory problems that might occur with prolonged storage of the needle through the sealing means? Or can device be in prolonged storage with needle advanced?

An independent claim of '914 covers the advancement and subsequent retraction of a needle as we pictured this preventing the loss of sealing means memory with the entire spectrum of sealing means – from valves to slit elastomeric membranes. This may end up being one of the most powerful claims to block all competitors if you think it would be necessary for most sealing means to provide minimal resistance to catheter advancement while still retaining sealing memory when the needle is withdrawn.

John

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**From:** Karl R. Leinsing [mailto:kleinsing@atechdesigns.com]  
**Sent:** Thursday, January 22, 2009 9:08 AM  
**To:** 'John Stocking'  
**Subject:** RE: Nexiva Deadspace

Hi John,

Thanks for the detailed explanations. I guess I knew all that, but became confused when quickly reading and replying to your e-mail. It seems that the fenestration would make seeing the blood sooner. Not sure how much sooner, but it could be an advantage. Yes, I think the design could be attractive to Cardinal with the early patent date. I will review the patent again with all this information and contact Cardinal.

Karl

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**From:** John Stocking [mailto:jestoc01@insightbb.com]  
**Sent:** Wednesday, January 21, 2009 11:47 PM  
**To:** kleinsing@atechdesigns.com  
**Subject:** RE: Nexiva Deadspace

Hi Karl,

Francis and I use the term 'fenestration' in our '914 patent to represent a hole through the sidewall of a needle. The advantages of fenestrations are that they allow for a flash between the inner wall of the catheter and the outer wall of the needle and/or between the needle and catheter hub. These flashes give the user rapid feedback that the blood vessel has been entered and prevent advancing the needle tip through the back wall of the vessel. With designs that also include sideport flash tubing, fenestrations allow blood to flow through the sidewall of the needle then through the sideport flash tubing. This gives continued feedback within a single field of view that the needle and then catheter remain within the blood vessel.

We call the wire, rod, or other structure that blocks the main channel of the needle an 'obturator'. The obturator blocks blood from flowing through the rear of the needle, enhancing the flash of blood through the sideport and preventing rearward blood spillage. It also can help blunt the needle tip when the needle is retracted over it. In certain designs, it can also help 'guide' the needle when the needle is advanced from or retracted into a needle